

AO 435

Case 25-40976 Doc 829 Filed 06/20/25 Entered 06/20/25 08:22:25 Main Document Pg 1 of 1

(Rev. 10/23)

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS

FOR COURT USE ONLY

TRANSCRIPT ORDER

1. NAME

2. PHONE NUMBER

3. DATE

4. DELIVERY ADDRESS OR EMAIL

5. CITY

6. STATE

7. ZIP CODE

8. CASE NUMBER

9. JUDGE

DATES OF PROCEEDINGS

10. FROM

11. TO

12. CASE NAME

13. CITY

14. STATE

15. ORDER FOR

☐ APPEAL

☐ CRIMINAL

☐ CRIMINAL JUSTICE ACT

☐ BANKRUPTCY

☐ NON-APPEAL

☐ CIVIL

☐ IN FORMA PAUPERIS

☐ OTHER (Specify)

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING			
<input type="checkbox"/> BAIL HEARING			

17. ORDER

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18. SIGNATURE

19. DATE

TRANSCRIPT TO BE PREPARED BY

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TRANSCRIPT ORDERED

TRANSCRIPT RECEIVED

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PARTY RECEIVED TRANSCRIPT

DATE

BY

DEPOSIT PAID

TOTAL CHARGES

LESS DEPOSIT

TOTAL REFUNDED

TOTAL DUE

PROCESSED BY

PHONE NUMBER

COURT ADDRESS

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

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